

30-4917

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		4-17-01
O.I.P.E. CLASSIFIER		10	5-7-01
FORMALITY REVIEW	AM	917	06-06-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
= Allowed
- (Through numeral) Canceled
+ Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Final	Original	Date
1	✓		
2	✓		
3	✓		
4	✓		
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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